

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000076181

Entity Name: CASINO TRAVEL INC.

FILED  
Apr 27, 2009  
Secretary of State

## Current Principal Place of Business:

752 NE 83 ST  
MIAMI, FL 33138

## New Principal Place of Business:

10015 W OKEECHOBEE RD  
#101  
HIALEAH GARDENS, FL 33016

## Current Mailing Address:

P.O.BOX 416191  
MIAMI BEACH, FL 33141

## New Mailing Address:

FEI Number: 01-0912702

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DIEGO, CASABALLE  
10015 W OKEECHOBEE RD  
#101  
HIALEAH GARDENS, FL 33016 US

## Name and Address of New Registered Agent:

CASABALLE, DIEGO  
10015 W OKEECHOBEE RD  
#101  
HIALEAH GARDENS, FL 33016 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DIEGO CASABALLE

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DIEGO, CASABALLE  
Address: 10015 W OKEECHOBEE RD  
City-St-Zip: HIALEAH GARDENS, FL 33016

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CASABALLE, DIEGO  
Address: 10015 W OKEECHOBEE RD  
City-St-Zip: HIALEAH GARDENS, FL 33016

Title: S ( ) Change (X) Addition  
Name: CAJIGAS, JACQUELINE  
Address: 10015 W OKEECHOBEE RD  
City-St-Zip: HIALEAH GARDENS, FL 33016

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CASABALLE DIEGO

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date